



STATE OF TENNESSEE  
DEPARTMENT OF COMMERCE AND INSURANCE  
REAL ESTATE APPRAISER COMMISSION  
500 JAMES ROBERTSON PARKWAY, SUITE 620  
NASHVILLE, TENNESSEE 37243  
615-741-1831

## Trainee Renewal Notice

Registration Number \_\_\_\_\_

Expiration Date \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Trainee Renewal Fee.....\$125.00

**Payment and notarized sponsor affidavit must  
be received in this office 30 days prior to  
expiration date or late fee of \$100.00 applies.**

Total Amount Due.....\$\_\_\_\_\_

Amount Paid.....\$\_\_\_\_\_

Please indicate the type of address change by marking an  
"X" in the appropriate box below.

☐ Business ☐ Home ☐ Mailing

Phone: \_\_\_\_\_

Fax Number \_\_\_\_\_

New Address: \_\_\_\_\_

\_\_\_\_\_

E-Mail Address: \_\_\_\_\_

### Return To:

State of Tennessee  
Real Estate Appraiser Commission  
500 James Robertson Parkway Suite 620  
Nashville, Tennessee 37243-1166

**This affidavit must be completed by your primary sponsor and notarized for your renewal to be processed.**

This is to certify that I, as a certified appraiser, have agreed  
to sponsor, \_\_\_\_\_, as a trainee under  
my direct supervision. I take responsibility for each  
appraisal performed under my supervision by such trainee.

☐ **Please check if this is a sponsorship change.**

\_\_\_\_\_  
Signature of Sponsor TN CR or CG#

State of \_\_\_\_\_

County of \_\_\_\_\_

Sworn to and subscribed before me this

\_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Notary Public

My Commission Expires: \_\_\_\_\_